

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
O.I.P.E. CLASSIFIER	08 Lm	49	6/16/01
FORMALITY REVIEW	YG	956	07/25/01
RESPONSE FORMALITY REVIEW			

**INDEX OF CLAIMS**

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) ... Canceled A ..... Appeal  
 ÷ ..... Restricted 0 ..... Objected

Claim	Date
1	10/17/01
2	
3	N
4	✓
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6	
7	✓
8	✓
9	0
10	N
11	N
12	✓
13	N
14	✓
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20	
21	✓
22	✓
23	N
24	✓
25	
26	
27	
28	✓
29	0
30	N
31	N
32	N
33	N
34	✓
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41	N
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50	N

Claim	Date
51	9/16/01
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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Jc/900  
07/25/01